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VOLPE AND KOENIG, P.C.					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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					4.5			(Signature)
					12800	<u> </u>		(Date)
APPLICATION NO.	FILING DATE	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/580,524	05/24/2006		Michael James Un		MOR3-PT0		MOR3-PT022	4216
TITLE OF INVENTION	: METHOD OF MATUI	RING WINE						·
APPLN. TYPE	SMALL ENTITY	ISSUE FEE D	UE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	ES \$755		\$300	<b>\$</b> 0		\$1055	12/30/2009
EXAMINER		ART UNIT	,	CLASS-SUBCLASS	J			
WEIER, ANTHONY J		1794		426-422000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTE	D ON T	THE PATENT (print or ty	pe)		J	soumant has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE				(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
	ternational L		toria, Australia					
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖺 Corporation or other private group entity. 🗀 Government								
4a. The following fee(s) are submitted:  4 Issue Fee				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.				
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5. Change in Entity Stat								
a. Applicant claims	s SMALL ENTITY statt	us. See 37 CFR 1.2	27.	☐ b. Applicant is no lor				
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Authorized Signature				Date 12 8 09				
Typed or printed name	Alissa L. S	Registration No. 61,750						
This collection of informan application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, Valexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this but (irginia 22313-1450. DC 13-1450.	CFR 1.311. The int U.S.C. 122 and 3 USPTO. Time w rden, should be se O NOT SEND FER	ent to the	on is required to obtain or 1.14. This collection is est depending upon the indi- e Chief Information Offic COMPLETED FORMS T spond to a collection of in	er, U.S. Patent and O THIS ADDRES	Trader S. SEN	nark Office, U.S. Depa D TO: Commissioner	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.